

FORM INSP
Rev 05/11

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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Inspection Date:
03/06/2012

Document Number:
667600114

Overall Inspection:
Unsatisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>415001</u>	<u>414834</u>		<u>HICKEY, MIKE</u>

Operator Information:

OGCC Operator Number: 100322 Name of Operator: NOBLE ENERGY INC
Address: 1625 BROADWAY STE 2200
City: DENVER State: CO Zip: 80202

Contact Information:

Contact Name	Phone	Email	Comment
Pavelka, Linda		LPavelka@nobleenergyinc.com	

Compliance Summary:

QtrQtr: SENE Sec: 21 Twp: 3N Range: 67W

Inspector Comment:

Inspection at the request of the surface owner of API #05-123-30947.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
414834	LOCATION	AC	12/11/2009		-	Horse Iron P 21-27D	
415001	WELL	PR	01/10/2011		123-30947	Horse Iron P 22-32D	X
415003	WELL	PR	01/10/2011		123-30948	Horse Iron P 22-31D	X
415017	WELL	PR	01/11/2011		123-30956	Horse Iron P 22-33D	X
415019	WELL	PR	12/16/2010		123-30957	Horse Iron P 21-21D	X
416176	WELL	PR	01/11/2011		123-31302	Horse Iron P 21-27D	X

Equipment:

Location Inventory

Special Purpose Pits: _____	Drilling Pits: <u>2</u>	Wells: <u>5</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>11</u>	Separators: <u>5</u>	Electric Motors: <u>23</u>
Gas or Diesel Mortors: <u>8</u>	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: <u>2</u>	Gas Pipeline: <u>5</u>	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: <u>5</u>	Oil Tanks: <u>5</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: <u>8</u>

Location

Lease Road:				
Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Violation	Access road between tank batteries cuts off discharge from concrete lined irrigation canal. Irrigation flows will likely flood tank battery site.	Restore flood irrigation grading.	05/01/2012

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			
BATTERY	Satisfactory			

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			
TANK BATTERY	Satisfactory			

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	1	Satisfactory			

Tanks/Berms: <input type="checkbox"/> New Tank Tank ID: _____					
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	3	<100 BBLS	BV CONCRETE	,	
S/U/V: Unsatisfactory	Comment: _____				
Corrective Action:	Label all vessels with contents and capacity.			Corrective Date:	05/25/2012

Paint

Condition: _____

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment					

Tanks/Berms:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	3	300 BBLS	STEEL AST	40.211950,104.889050	
S/U/V:	Unsatisfactory	Comment: _____			
Corrective Action:	Label all vessels with contents and capacity.			Corrective Date:	06/01/2012
Paint					
Condition	Adequate				
Other (Content)	Not labelled				
Other (Capacity)	Not labelled				
Other (Type)	_____				
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action	_____			Corrective Date	_____
Comment	_____				
Venting:					
Yes/No	Comment				_____
_____	_____				_____
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	
_____	_____	_____	_____	_____	

Predrill

Location ID: 414834

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____
 Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
Agency	caplank	Location is in a sensitive area because of shallow groundwater; therefore, either a lined drilling pit or closed loop system is required.	12/08/2009
Agency	caplank	Location is in a sensitive area because of proximity to a domestic water well; therefore either a lined drilling pit or closed loop system is required.	12/08/2009

Wildlife BMPs:

Stormwater:

Comment:

Staking:

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____
 Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____
 Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____
 Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Well

Facility ID: <u>415001</u>	API Number: <u>123-30947</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>415003</u>	API Number: <u>123-30948</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>415017</u>	API Number: <u>123-30956</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>415019</u>	API Number: <u>123-30957</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>416176</u>	API Number: <u>123-31302</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well: _____ Lat _____ Long _____

DWR Receipt Num: _____ Owner Name: _____ GPS : _____

Field Parameters: _____

Sample Location: _____

Emission Control Burner (ECB): _____

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: DRY LAND

Comment: See inspection of API #05-123-31302 for reclamation inspection.

1003a. Debris removed? _____ CM _____

CA _____ CA Date _____

Waste Material Onsite? _____ CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? _____ CM _____

CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? _____ CM _____

CA _____ CA Date _____

Guy line anchors removed? _____ CM _____

CA _____ CA Date _____

Guy line anchors marked? _____ CM _____

CA _____ CA Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____

Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Inspector Name: HICKEY, MIKE

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: DRY LAND _____

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation _____

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment

S/U/V: _____ Corrective Date: _____

Comment: _____

CA: _____